

FIRST REGULAR SESSION

SENATE BILL NO. 537

94TH GENERAL ASSEMBLY

INTRODUCED BY SENATOR LAGER.

Read 1st time February 20, 2007, and ordered printed.

TERRY L. SPIELER, Secretary.

2084S.011

AN ACT

To repeal section 334.735, RSMo, and to enact in lieu thereof one new section relating to physician assistants.

Be it enacted by the General Assembly of the State of Missouri, as follows:

Section A. Section 334.735, RSMo, is repealed and one new section
2 enacted in lieu thereof, to be known as section 334.735, to read as follows:

334.735. 1. As used in sections 334.735 to 334.749, the following terms
2 mean:

3 (1) "Applicant", any individual who seeks to become licensed as a
4 physician assistant;

5 (2) "Certification" or "registration", a process by a certifying entity that
6 grants recognition to applicants meeting predetermined qualifications specified
7 by such certifying entity;

8 (3) "Certifying entity", the nongovernmental agency or association which
9 certifies or registers individuals who have completed academic and training
10 requirements;

11 (4) "Department", the department of economic development or a
12 designated agency thereof;

13 (5) "License", a document issued to an applicant by the department
14 acknowledging that the applicant is entitled to practice as a physician assistant;

15 (6) "Physician assistant", a person who has graduated from a physician
16 assistant program accredited by the American Medical Association's Committee
17 on Allied Health Education and Accreditation or by its successor agency, who has
18 passed the certifying examination administered by the National Commission on
19 Certification of Physician Assistants and has active certification by the National

EXPLANATION—Matter enclosed in bold-faced brackets [thus] in this bill is not enacted and is intended to be omitted in the law.

20 Commission on Certification of Physician Assistants who provides health care
21 services delegated by a licensed physician. A person who has been employed as
22 a physician assistant for three years prior to August 28, 1989, who has passed the
23 National Commission on Certification of Physician Assistants examination, and
24 has active certification of the National Commission on Certification of Physician
25 Assistants;

26 (7) "Recognition", the formal process of becoming a certifying entity as
27 required by the provisions of sections 334.735 to 334.749;

28 (8) "Supervision", control exercised over a physician assistant working
29 within the same [office] facility [of] as the supervising physician [except]
30 **subject to the following:**

31 (a) A physician assistant may make follow-up patient examinations in
32 hospitals, nursing homes, **patient homes**, and correctional facilities, each such
33 examination being reviewed, approved and signed by the supervising physician;

34 (b) **In all other facilities not mentioned in paragraph (c) of this**
35 **subdivision, a supervising physician shall be present fifty-five percent**
36 **of the time in the facility in which the physician assistant is providing**
37 **care. The supervising physician must be readily available in person or**
38 **via telecommunication during the time the physician assistant is**
39 **providing care and no further than thirty miles by road using the most**
40 **direct route available. The supervising physician shall not be situated**
41 **at any distance from the facility that creates an impediment to effective**
42 **intervention and supervision of patient care or adequate review of**
43 **services; and**

44 (c) **A supervising physician shall be present ten percent of the**
45 **time in the facility in which the physician assistant is providing patient**
46 **care, when that facility is a federally funded clinic, including a**
47 **community health center or a rural health clinic; a hospital; a nursing**
48 **home or other long-term care facility; a correctional facility; a clinic**
49 **established for treatment of sexually transmitted diseases; a dialysis**
50 **center; a school or student health center; or a migrant health**
51 **facility. The supervising physician shall be readily available in person**
52 **or via telecommunication during all times the physician assistant is**
53 **providing patient care and no further than fifty miles by road, using**
54 **the most direct route available. The supervising physician shall not be**
55 **situated at any distance from the facility that creates an impediment**

56 **to effective intervention and supervision of patient care or adequate**
57 **review of services.**

58 The board shall promulgate rules pursuant to chapter 536, RSMo, for [the
59 proximity of practice between the physician assistant and the supervising
60 physician and] documentation of joint review of the physician assistant activity
61 by the supervising physician and the physician assistant.

62 2. The scope of practice of a physician assistant shall consist only of the
63 following services and procedures:

64 (1) Taking patient histories;

65 (2) Performing physical examinations of a patient;

66 (3) Performing or assisting in the performance of routine office laboratory
67 and patient screening procedures;

68 (4) Performing routine therapeutic procedures;

69 (5) Recording diagnostic impressions and evaluating situations calling for
70 attention of a physician to institute treatment procedures;

71 (6) Instructing and counseling patients regarding mental and physical
72 health using procedures reviewed and approved by a licensed physician;

73 (7) Assisting the supervising physician in institutional settings, including
74 reviewing of treatment plans, ordering of tests and diagnostic laboratory and
75 radiological services, and ordering of therapies, using procedures reviewed and
76 approved by a licensed physician;

77 (8) Assisting in surgery;

78 (9) Performing such other tasks not prohibited by law under the
79 supervision of a licensed physician as the physician's assistant has been trained
80 and is proficient to perform;

81 (10) Physician assistants shall not perform abortions.

82 3. Physician assistants shall not prescribe nor dispense any drug,
83 medicine, device or therapy independent of consultation with the supervising
84 physician, nor prescribe lenses, prisms or contact lenses for the aid, relief or
85 correction of vision or the measurement of visual power or visual efficiency of the
86 human eye, nor administer or monitor general or regional block anesthesia during
87 diagnostic tests, surgery or obstetric procedures. Prescribing and dispensing of
88 drugs, medications, devices or therapies by a physician assistant shall be
89 pursuant to a physician assistant supervision agreement which is specific to the
90 clinical conditions treated by the supervising physician and the physician
91 assistant shall be subject to the following:

92 (1) A physician assistant shall not prescribe controlled substances;

93 (2) The types of drugs, medications, devices or therapies prescribed or
94 dispensed by a physician assistant shall be consistent with the scopes of practice
95 of the physician assistant and the supervising physician;

96 (3) All prescriptions shall conform with state and federal laws and
97 regulations and shall include the name, address and telephone number of the
98 physician assistant and the supervising physician;

99 (4) A physician assistant or advanced practice nurse as defined in section
100 335.016, RSMo, may request, receive and sign for noncontrolled professional
101 samples and may distribute professional samples to patients;

102 (5) A physician assistant shall not prescribe any drugs, medicines, devices
103 or therapies the supervising physician is not qualified or authorized to prescribe;
104 and

105 (6) A physician assistant may only dispense starter doses of medication
106 to cover a period of time for seventy-two hours or less.

107 4. A physician assistant shall clearly identify himself or herself as a
108 physician assistant and shall not use or permit to be used in the physician
109 assistant's behalf the terms "doctor", "Dr." or "doc" nor hold himself or herself out
110 in any way to be a physician or surgeon. No physician assistant shall practice or
111 attempt to practice without physician supervision or in any location where the
112 supervising physician is not immediately available for consultation, assistance
113 and intervention, except **as otherwise provided in this section, and** in an
114 emergency situation, nor shall any physician assistant bill a patient
115 independently or directly for any services or procedure by the physician assistant.

116 5. For purposes of this section, the licensing of physician assistants shall
117 take place within processes established by the state board of registration for the
118 healing arts through rule and regulation. The board of healing arts is authorized
119 to establish rules pursuant to chapter 536, RSMo, establishing licensing and
120 renewal procedures, supervision, supervision agreements, fees, and addressing
121 such other matters as are necessary to protect the public and discipline the
122 profession. An application for licensing may be denied or the license of a
123 physician assistant may be suspended or revoked by the board in the same
124 manner and for violation of the standards as set forth by section 334.100, or such
125 other standards of conduct set by the board by rule or regulation. Persons
126 licensed pursuant to the provisions of chapter 335, RSMo, shall not be required
127 to be licensed as physician assistants. **All applicants for physician assistant**

128 **licensure who complete a physician assistant training program after**
129 **January 1, 2008, shall have a master's degree from a physician assistant**
130 **program.**

131 6. "Physician assistant supervision agreement" means a written
132 agreement, jointly agreed-upon protocols or standing order between a supervising
133 physician and a physician assistant, which provides for the delegation of health
134 care services from a supervising physician to a physician assistant and the review
135 of such services.

136 7. When a physician assistant supervision agreement is utilized to provide
137 health care services for conditions other than acute self-limited or well-defined
138 problems, the supervising physician or other physician designated in the
139 supervision agreement shall see the patient for evaluation and approve or
140 formulate the plan of treatment for new or significantly changed conditions as
141 soon as practical, but in no case more than two weeks after the patient has been
142 seen by the physician assistant.

143 8. At all times the physician is responsible for the oversight of the
144 activities of, and accepts responsibility for, health care services rendered by the
145 physician assistant.

146 9. **It is the responsibility of the supervising physician to**
147 **determine and document the completion of at least a one-month period**
148 **of time during which the licensed physician assistant shall practice**
149 **with a supervising physician continuously present before practicing in**
150 **a setting where a supervising physician is not continuously present.**

151 10. **It shall be void and against public policy to require any**
152 **physician to enter into any contract or other agreement to act as a**
153 **supervising physician for any physician assistant. A physician shall**
154 **have the right to refuse to act as a supervising physician, without**
155 **penalty, for a particular physician assistant. No contract or other**
156 **agreement shall limit the supervising physician's ultimate authority**
157 **over any protocols or standing orders or in the delegation of the**
158 **physician's authority to any physician assistant.**

159 11. **Physician assistants shall file with the board a copy of their**
160 **physician assistant agreement.**